foundations)

Department of the

Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

DLN: 93493314009856 OMB No 1545-0047

Intern	al Rev	enue Serv	ice					Inspection
A F	or th	e 2015 ca	alendar year, or tax year begin	ning 01-01-2015 , and ending 12-31-20	15			
B Ch	eck ıf	applicable	C Name of organization US Chamber Institute for Legal R	eform		D Emp	loyer id	lentification number
		change				52-2	21090	35
	lame d nitial re	change	Doing business as					
F		eturn				F Telep	hone nu	
		ınated	Number and street (or P O box in 1615 H Street NW	f mail is not delivered to street address) Room/s	uite			
		d return		country, and ZIP or foreign postal code		(202	2)463-	-5590
Ap	plicati	ion pending	Washington, DC 20062	ountry, and ZIP of foreign postal code		G Gross	s receipt	s \$ 44,889,806
			F Name and address of prin	cıpal officer	H(a) J	s this a grou	ıp retu	rn for
			Stan M Harrell 1615 H Street NW		S	ubordinates	7	┌ Yes 🗸
			Washington, DC 20062		U/65 /	No Are all subor	dinates	
I Ta	ıx-exe	empt status	501(c)(3) 3 501(c)(6)	◀ (Insert no)	` '	ncluded?		1 165 110
J W	ebsit	t e:► ww	vw legalreformnow com			Group exem		t (see instructions) umber ►
K For	m of c	organizatior	n 🗸 Corporation Trust Asso	ociation Other ►		of formation		M State of legal domicile VA
Pa	rt I		nmary					
		•	_	ion or most significant activities g (Please see Schedule O for the contini	uation)the	nation's hijs	iness	community with the
				gal system simpler, fairer and faster for e	•	nation 5 bas		sommanicy with the
ce	-							
Je .	-							
Ven	,-	Chook th	his how b I if the organization	discontinued its operations or disposed	of more ti	han a Foy of		
Activities & Governance	~	Check ti	his box P If the organization	raiscontinued its operations of disposed	or more tr	11411 25% 011	is net	assets
≈ 5	3	Number	of voting members of the gove	rning body (Part VI, line 1a)			3	34
Se?			•	s of the governing body (Part VI, line 1b			4	33
ME.				n calendar year 2015 (Part V, line 2a)	•		5	26
Acı			·	fnecessary)			6	0
			`	Part VIII, column (C), line 12			7a	0
				from Form 990-T, line 34			7b	
						Prior Year		Current Year
	8	Contr	ributions and grants (Part VIII	, line 1h)		44,800	,508	44,741,726
랼				, line 2g)		<u> </u>	765	0
ēn uð Að	10	Inves	stment income (Part VIII, colu	mn (A), lines 3, 4, and 7d)		113	3,442	107,280
æ	11	Other	r revenue (Part VIII, column (/	A), lines 5, 6d, 8c, 9c, 10c, and 11e)		88	3,800	40,800
	12	Total 12)	revenue—add lines 8 through	11 (must equal Part VIII, column (A), lıı	ne	45,003	3,515	44,889,806
	13		and similar amounts paid (Pa	art IX, column (A), lines 1-3)			0	
	14	Benef	fits paid to or for members (Pai	rt IX, column (A), line 4)			0	0
	15	Saları	ies, other compensation, emplo	oyee benefits (Part IX, column (A), lines		6,821	528	7,490,642
Expenses	1	5-10	•			·		
8	16a			IX, column (A), line 11e)	•	999	9,996	1,000,000
Д	b		undraising expenses (Part IX, column	• ***		42.476		24.042.470
	17		• • • • • • • • • • • • • • • • • • • •), lines 11a-11d, 11f-24e)	• —	42,176		31,943,170
	18 19		,	must equal Part IX, column (A), line 25) ne 18 from line 12		49,997	` +	40,433,812
გ გ.	15	Kevei	— Subtract III	nie 10 nom nne 12		ing of Curren		End of Year
Net Assets or Fund Balances	1							
Ass I Ba	20		assets (Part X, line 16)			20,587		25,043,210
₹	21		liabilities (Part X, line 26) .		•	20,587	7 216	25.042.210
	22 74		nature Block	ect line 21 from line 20		20,367	,210	25,043,210
my k	nowle arer h	edge and nas any k Sign	belief, it is true, correct, and converged to the converg	examined this return, including accompa complete Declaration of preparer (other t			n all ın	
		<u> </u>	e or print name and title				1 ====	
De!	_1		Print/Type preparer's name Jennifer Rhoderick	Preparer's signature Jennifer Rhoderick	Date	Check I if		95735
Pai		H	Firm's name Frnst and Young US	L LLP		self-employed Firm's EIN ►		 5596
	par	er	Firm's address ► 111 Monument Circl			Phone no (3:		
Use	or e	niy				1		

Indianapolis, IN 46204

Part IV Checklist of Required Schedules

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20a

20b

Yes

Yes No.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🔰	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I \supseteq 1, \ldots, 1, \ldots, 1, \ldots, 1$.	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Pait V	10		No
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		N o
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> 2	11 d	Yes	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
1				

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 🛂

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H .

assistance to or for foreign individuals? If "Yes," complete Schedule F, Paits III and IV . . . 🔧

1	current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Υe
a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," 25a 25b year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. **b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family 27 member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 28a

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Nο

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Yes

Yes

Yes

Yes

Yes

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38

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was Yes 28c an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 🛂 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

33

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Pait I 😼

Was the organization related to any tax-exempt or taxable entity? If "Yes." complete Schedule R. Pait II. III. or IV.

34

35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled 35b entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛂

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🔧 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. 🔽
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 118	_		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	<u>'</u>		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?	7a 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
·	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? \cdot .	7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	In which the organization is licensed to issue qualified health plans	-		
		 142	 	 _{NL} _
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No

year by the following The governing body? . .

Section C. Disclosure

Part

90 (2015)	F
VI Governance, Management, and Disclosure	

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below,

describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI .

Se	ction A. Governing Body and Management				
				Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	34		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				

b Each committee with authority to act on behalf of the governing body?

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)

State the name, address, and telephone number of the person who possesses the organization's books and records

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

Did the organization have a written document retention and destruction policy?

Did the organization have a written whistleblower policy?

a The organization's CEO, Executive Director, or top management official

 ${f b}$ Other officers or key employees of the organization

List the States with which a copy of this Form 990 is required to be filed▶

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

interest policy, and financial statements available to the public during the tax year

▶Stan M Harrell 1615 H Street NW Washington, DC 200622000 (202) 463-5590

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.

Enter the number of voting members included in line 1a, above, who are ındependent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

Yes

age 6

Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was

33

Νo Nο Nο Νo

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

10a Did the organization have local chapters, branches, or affiliates? .

Νo Νo

Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

2 3 4 5 6

7a

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Nο

Νo

Nο

Νo

Νo

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Did the organization contemporaneously document the meetings held or written actions undertaken during the

10a

10h

11a

12b

12c

13

14

15a

15b

16a

16b

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the org	anization nor any	related	l orga	anıza	ition	comp	ensa	ted any current offic	cer, director, or trus	stee
(A) Name and Title	(B) Average hours per week (list any hours	more t	tion (han (on is	one l both ector	oox, an d	heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustwe	Officer	key employee	Highest compensated emptovee	Former			organization and related organizations
See Additional Data Table										
	-									
	1									
	1									
	1									
										Form 990 (2015)
										10mm 220 (2013)

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours	more t	tion (han (on is	one b both	oox, an	heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total		 ection /		•		. •				
d Total (add lines 1b and 1c				٠.	٠.	•		4,253,539	0	332,084

\$100,000 of reportable compensation from the organization ▶ 12

Total number of individuals (including but not limited to those listed above) who received more than

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual Yes For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for 5 Νo

Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

\$100,000 of compensation from the organization > 39

compensation from the organization Report compensation for the calendar year endir	ng with or within the organization	ı's tax year
(A) Name and business address	(B) Description of services	(C) Compensation
Akın Gump Strauss Hauer & Feld LLP	Legal research	747,373
Dept 7247 6827 Philadelphia, PA 19170		
SkaddenArps Slate Meagher & Flom LLP	Legal research	714,528
PO Box 1764 White Plains, NY 10602		
Judicial Evaluation Institute	Membership pymts	647,400
701 8TH Street NW Suite 500 Washington, DC 20001		
Campaigngrid LLC	Ad Services	620,480
414 Commerce Drive Suite 100 Fort Washington, PA 19034		
Purple Strategies	Public relation services	583,021
815 Slaters Lane Alexandna, VA 22314		
2 Total number of independent contractors (including but not limited to those listed abov	e) who received more than	

Yes

No

Form 99							Page S
Part V	/##	Statement of Revenue		h.a Dawk V/III			
		Check if Schedule O contains a response or note to		(A) cal revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections
- ×	1a	Federated campaigns 1a					
ants	ь	Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events 1c					
ifts. ar A	d	Related organizations 1d					
S, G m∷	e	Government grants (contributions) 1e					
ions r Si	f	All other contributions, gifts, grants, and 1f 44,74	1,726				<u> </u>
but	g	similar amounts not included above Noncash contributions included in lines					
intri d O	-	1a-1f \$		44 744 705			
<u>ರಿ ೯</u>	h	Total. Add lines 1a-1f	•	44,741,726			
ΕĘ	3.	Business C	ode				
Program Service Revenue	2a b						
	c						
Pr VIC	d						
א ה	e						
gra	f	All other program service revenue					
ΔĔ	g	Total. Add lines 2a-2f	>				
	3	Investment income (including dividends, interest, and other similar amounts)	•	107,280			107,280
	4	Income from investment of tax-exempt bond proceeds	•				
	5	Royalties	>				
	6a	(i) Real (ii) Person	nal				
	l ba						
	b	Less rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	(i) Securities (ii) Other Gross amount from sales of assets other than inventory	<u>'</u>				
	ь	Less cost or other basis and					
	c	sales expenses Gain or (loss)					
	d	Net gain or (loss)	· b				
enne/	8a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18					
Off	b c	Less direct expenses b Net income or (loss) from fundraising events					
		Gross income from gaming activities See Part IV, line 19	P				
	1	Less direct expenses b Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances .	•				
	b c	Less cost of goods sold b Net income or (loss) from sales of inventory	<u> </u>				
	Ť	Miscellaneous Revenue Business C					
	11a	Affiliate svc charge	900099	40,800	40,800		
	ь						
	c						
	d e	All other revenue	•				
	12			40,800			
		Total revenue. See Instructions	<u> </u>	44,889,806	40,800		107,280

orm	990 (2015)				Page 1 0
Par	t IX Statement of Functional Expenses				
Secti	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns	All other organiza	itions must com	plete column (A)	
	Check if Schedule O contains a response or note to any line in	this Part IX			
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	· ,	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,905,592			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	2,837,724			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits	1,747,326			
10	Payroll taxes				
11	Fees for services (non-employees)				
 а	Management	182,897			
ь	Legal	672,125			
c	Accounting	55,355			
d	Lobbying	8,874,159			
e	Professional fundraising services See Part IV, line 17	1,000,000			
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,642,821			
12	Advertising and promotion	2,063,351			
13	Office expenses	584,997			
14	Information technology	234,919			
15	Royalties				
16	Occupancy				
17	Travel	687,698			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	415,474			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Contr to other orgs	6,998,358			
b	Contr to affiliates	3,213,809			· ·
c	Investment impairment	2,200,458			
d	Admin support services	950,000			
е	All other expenses	166,749			
25	Total functional expenses. Add lines 1 through 24e	40,433,812			
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 9	90 (2015)	
Part	X	Balance Sheet	
		Check if Schedule O contains a response or no	οt
	1	Cash-non-interest-bearing	
	2	Savings and temporary cash investments	
	3	Pledges and grants receivable, net	

5

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10a

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34

Net Assets or Fund Balances

II of Schedule L

Accounts receivable, net . .

Notes and loans receivable, net .

Prepaid expenses and deferred charges

Investments—publicly traded securities

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments—program-related See Part IV, line 11

Total assets.Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Other liabilities (including federal income tax, payables to related third

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Unsecured notes and loans payable to unrelated third parties

parties, and other liabilities not included on lines 17-24)

Loans and other payables to current and former officers, directors, trustees,

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

Complete Part X of Schedule D

Unrestricted net assets . . .

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

Temporarily restricted net assets .

Total liabilities.Add lines 17 through 25 .

complete lines 27 through 29, and lines 33 and 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Inventories for sale or use .

Complete Part VI of Schedule D

Less accumulated depreciation .

Intangible assets

Part II of Schedule L

Grants payable .

Deferred revenue

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete

rm 990 (2015)			Рa
art X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X $$. $$.			
		(A)		(B)
		Beginning of year		End of ye
1	Cash-non-interest-bearing		1	

	Ρā	age	11
		٠,	_
- ((B)		

12,698,041

12.345.169

25,043,210

7,197,361

17.845.849

25.043,210

25.043,210 Form 990 (2015)

11,857,815

3

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6

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9

10c

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

30

31

33

0

3,562,320

17.024.896

20.587,216

20.587,216

8,729,401

20,587,216

ce Sheet						
f Schedule O contains a response or note to any line in this Part X						

10a

10b

orm 990 ((2015)	Page
Part X	Balance Sheet	
	Charles & Cabadula O carabama a managara ay naba ba anu luna in bhia Dawb V	

Form 990 (2	2015)	Page	1
Part X	Balance Sheet		
	Check if Schedule O contains a response or note to any line in this Part X		-

Form 990 (2	(2015)	Page 1
Part X	Balance Sheet	

, , , , ,	2013)
ΧI	Reconcilliation of Net Assets
	Check if Schedule O contains a respons

XI	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part $\boldsymbol{X}\boldsymbol{I}$				

Revenue less expenses Subtract line 2 from line 1 .

1 Total expenses (must equal Part IX, column (A), line 25) . . . 2

40,433,812 4,455,994 20,587,216

3

4

9

10

Page **12**

44,889,806

25,043,210

No

Νo

Νo

Form 990 (2015)

Yes

Yes

Yes

2a

2b

2c

3a

3b

Net unrealized gains (losses) on investments . 5 Donated services and use of facilities . 6 Investment expenses 7 Prior period adjustments 8

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

Check if Schedule O contains a response or note to any line in this Part XII

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

If the organization changed its method of accounting from a prior year or checked "Other," explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

✓ Consolidated basis

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Other changes in net assets or fund balances (explain in Schedule O) .

Both consolidated and separate basis

Both consolidated and separate basis

Software ID: Software Version:

EIN: 52-2109035

Name: US Chamber Institute for Legal Reform

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	unle:	ore t ss pe offi direc	han erso cer tor/t	not one n is and rust	tee)	an	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization	
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			and related organizations	
Katherine L Adams Director	1 00	x						0	0	О	
Hubert L Allen	1 00										
Director		Х						0	0	0	
Stanton D Anderson	1 00	x							0		
Director		_ ^						0	O	0	
S Jack Balagıa Jr	1 00	x						0	0	0	
Director											
Andrew A Barnard	1 00	x						0	0	0	
Director	1.00										
Rupert Bondy Director	1 00	×						0	0	o	
Kım M Brunner	1 00										
Chairman/Director		X						0	0	0	
James B Buda	1 00										
Director		Х						0	0		
John J Castellanı	1 00	l x						0	0	0	
Director		_ ^						U	U		
Kenneth W Cole	1 00	×						0	0		
Director		^						١	U		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) (B) (C) (D) (E)

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han rso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	and related organizations
Stephen M Cutler Director	1 00	x						0	0	
Robert DeBerardine Director	1 00	×						0	0	
Brackett B Denniston III Director	1 00	х						0	0	
Thomas J Donohue CEO/Director	1 00	x		×				0	0	
John M Engler Director	1 00	x						0	0	
Thomas A Gottschalk Director	1 00	×						0	0	

1 00

1 00

1 00

1 00

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Х

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0

0

0

Patricia R Hatler

Patricia A Henry

Mark V Holden

Jeffrey W Jackson

Director

Director

Director

Director

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) (B) (C) (D) (E)

(A) Name and Title	(B) Average hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	organization and related organizations
Charles J Kalıl Director	1 00	×						0	0	
Francis A Keating II Director	1 00	×						0	0	
James F Kelleher Director	1 00	×						0	0	
James Y Kerr II Director	1 00	×						0	0	
Dennis F Kerrigan Jr Director	1 00	×						0	0	
Paul J Krump Director	1 00	×						0	0	
Susan L Lees	1 00	х						0	0	

1 00

1 00

1 00

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0

0

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Director

Director

Director

Director

Connie Lewis Lensing

Richard G McCarty

Bradford Nielson

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors**

Assistant Secretary

Lily Fu Claffee

Stan M Harrell

Harold H Kım

EVP, ILR

Gnrl Cnsl & Scrty

Treasurer and CFO

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		,	and related organizations
Jay Orlandı Director	1 00	×						0	0	
Lisa A Rickard President/Director	40 00	×		х				2,273,782	0	59,29
Karen Roberts Director	1 00	×						0	0	
Kenneth F Spence III Director	1 00	×						0	0	
Jay Timmons Director	1 00	×						0	0	
Michael H Ullmann Director	1 00	x						0	0	
Jay Brown	1 00									

2 00 40 00

1 00

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51,95

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0

0

520,556

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors**

Bryan E Quigley

Matthew Webb

Mary H Terzino

Former Director

SVP, Strategic Communications

SVP, Legal Reform Policy

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe offi	han erso cer	one one n is and trus	tee)		(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	MISC)	MISC)	organization and related organizations
Matthew S De Cazotte VP, International Initiatives	40 00					x		196,962	0	53,59
Page C Faulk VP, Legal Reform Initiatives	40 00					х		243,699	0	29,66
Margnta J Perlman SVP, Marketing and Ops, ILR	40 00					x		218,858	0	56,52
Bryan E Quigley	40 00									

1 00 40 00

23 00

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Χ

375,383

234,212

190,087

51,18

29,86

0

0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE C**

Department of the

Name of the organization

2

2

3

1

2

4

US Chamber Institute for Legal Reform

Political expenditures

Was a correction made?

If "Yes," describe in Part IV

exempt function activities

(a) Name

(1) Republican State Leadership Committee

(3) Republican Attorneys General Association

(4) Democratic Attorney's General Association

(2) Republican Governors Association

Did the filing organization fileForm 1120-POL for this year?

Volunteer hours

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

52-2109035

(d) A mount paid from

filing organization's

1,780,000

250,000

175,400

25,300

Schedule C (Form 990 or 990-EZ) 2015

funds If none, enter -0-

Cat No 50084S

Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

Enter the amount of any excise tax incurred by organization managers under section 4955

Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the

(c) EIN

05-0532524

11-3655877

46-4501717

13-4220019

Enter the amount directly expended by the filing organization for section 527 exempt function activities

Enter the amount of the filing organization's funds contributed to other organizations for section 527

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

(b) Address

1201 F ST NW

Suite 250

Suite 800

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Washington, DC 20004

Washington, DC 20006

Washington, DC 20006

Denver, CO 80203

1580 Lincoln St Ste 1125

1747 Pennsylvania Ave NW

1747 Pennsylvania Ave NW

- If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 527 organizations Complete Part I-A only
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

DLN: 93493314009856

\$ 3,660,700

\$ 4,660,557

☐ Yes

Yes

4.660.557

☐ No

999,857

directly delivered to a separate political organization If none, enter -0-

group totals

Check ightharpoonup [if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures) Check ▶ ☐ If the filing organization checked box A and "limited control" provisions apply (b) Affiliated

(a) Filing Limits on Lobbying Expenditures organization's (The term "expenditures" means amounts paid or incurred.) totals Total lobbying expenditures to influence public opinion (grass roots 1a lobbvina) Total lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b)

Other exempt purpose expenditures

under section 501(h)).

Total exempt purpose expenditures (add lines 1c and 1d)

Lobbying nontaxable amount Enter the amount from the following table in both columns

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

Calendar year (or fiscal year

beginning in)

If the amount on line 1e, column (a) or (b) is:

Not over \$500,000

Over \$17,000,000

g

2a

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

reporting section 4911 tax for this year?

Lobbying nontaxable amount

Lobbying ceiling amount (150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

\$1,000,000

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

\$100,000 plus 15% of the excess over \$500,000

\$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period**

(b)2013

(a)2012

The lobbying nontaxable amount is: 20% of the amount on line 1e

Yes

(c)2014

☐ No

(d)2015

Schedule C (Form 990 or 990-EZ) 2015

(e) Total

d Mailings to members, legislators, or the public? Publications, or published or broadcast statements?

Grants to other organizations for lobbying purposes?

line 3, is answered "Yes."

Dues, assessments and similar amounts from members

expenses for which the section 527(f) tax was paid).

b If "Yes," enter the amount of any tax incurred under section 4912

Page 3

through the use of Volunteers?

c Media advertisements?

Other activities?

Total Add lines 1c through 1i

501(c)(6).

f

Part III-A

Part III-B

Total

Current year

Part I-A and Part I-C

Carryover from last year

1

2

3

1

2

b

c

3

filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity During the year, did the filing organization attempt to influence foreign, national, state or local

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Were substantially all (90% or more) dues received nondeductible by members?

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and

legislation, including any attempt to influence public opinion on a legislative matter or referendum,

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

Explanation

The US Chamber Institute for Legal Reform engaged in public education activities in support of its mission, which includes representing the nation's business community, and making America's legal system simpler, fairer and faster for everyone. In pursuit of these goals, ILR spends funds directly, or

501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A,

(a)

No

A mount

Yes

Yes

1

2

1

2a

2h

2c

3

4 5

Schedule C (Form 990 or 990EZ) 2015

No

Νo

Νo

43,779,646

21,530,272

-20,510,228

1,020,044

24.247.871

-23,227,827

Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information

Part IV

Return Reference

political expenditure next year?

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

works with other organizations with similar missions

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(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2015

DLN: 93493314009856 OMB No 1545-0047

Treas	rtment of the sury nal Revenue Service	Information about Schedule D (► Attach to Form 9 Form 990) and its inst		s.gov/f	<u>orm990</u> .	Open to Inspec	
Na	me of the organi Chamber Institute fo				Empl	oyer identif	fication numb	er
0.5	Chamber Institute to	n Legal Kelolili			52-2	109035		
Pa		izations Maintaining Donor ete if the organization answere			unds	r Accour	nts.	
			(a) Donor advised fur	nds	(b)	Funds and o	other account	ts
1	Total numbe	r at end of year						
2	Aggregate v year)	alue of contributions to (during						
3	Aggregate v	alue of grants from (during year)						
4	Aggregate v	alue at end of year						
5	Did the organization inform all donors and donor advisors in writing that the assets held in do funds are the organization's property, subject to the organization's exclusive legal control?				nor advi	ed	☐ Yes	┌ No
6	used only for cl	ation inform all grantees, donors, a naritable purposes and not for the b ermissible private benefit?				[^] purpose	☐ Yes	┌ N o
Pa	rt III Conse	rvation Easements. Comple	te if the organizatio	n answered "Yes" (on Forn	າ 990, Par	t IV, lıne 7.	
1	Purpose(s) of c	onservation easements held by the	e organization (check a	ll that apply)				
	Preservation)	on of land for public use (e g , recre	eation or	Preservation of a	an histor	ıcally ımpor	rtant land are	a
	Protection	of natural habitat		Preservation of a	a certifie	d historic s	tructure	
	Preservati	on of open space						
2		2a through 2d if the organization he last day of the tax year	ield a qualified conserv	ation contribution in	the form	of a consei	rvation	
						Held at	the End of th	ne Year
a		f conservation easements	nto		2a			
Ь		restricted by conservation easeme servation easements on a certified		ided in (a)	2b 2c			
c d	Number of cons	servation casements included in (c ire listed in the National Register		` '	2d			
3		servation easements modified, tran	sferred, released, exti	nguished, or terminat	ed by th	e organızatı	on during the	!
	tax year ▶							
4	Number of state	es where property subject to conse	rvation easement is lo	cated ▶				
5	_	ization have a written policy regard enforcement of the conservation e		oring, inspection, han	ndling of	Γ	Yes 🗀	No
6	Staff and voluni	teer hours devoted to monitoring, i	nspecting, handling of	violations, and enforc	ing cons	ervation ea	asements dur	ing the
	A mount of our		ating bandling of wals	tions and onforcing		.t.an aaaan	santa duruna t	haa
7	► \$	enses incurred in monitoring, inspe 	cting, nanding of viola	tions, and emorcing c	onserva	tion easem	ents during t	ne year
8		servation easement reported on lin on 170(h)(4)(B)(II)?	e 2(d) above satisfy th	ie requirements of se	ction 17		Yes	No
9	balance sheet,	escribe how the organization report and include, if applicable, the text n's accounting for conservation eas	of the footnote to the o					
Par		izations Maintaining Collectete if the organization answere			or Oth	er Simila	ar Assets.	
1 a	works of art, his	oon elected, as permitted under SF storical treasures, or other similar e, in Part XIII, the text of the footn	assets held for public (exhibition, education,	or resea	arch in furth		
b	works of art, his	tion elected, as permitted under SF storical treasures, or other similar e the following amounts relating to	assets held for public	· ·				blic

(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

(i) Revenue included on Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2015

Sch	edule D (Form 990) 2015									Page 2
Pai	Organizations Maintaining (continued)	Collections of A	Art, His	storica	al Trea	sures, or (Other Si	milar A	ssets	
3	Using the organization's acquisition, acce collection items (check all that apply)	ession, and other re	cords, c	heck an	y of the i	following that	are a signi	ıfıcant use	e of its	
а	Public exhibition		d	Г	Loan or	exchange pro	grams			
b	Scholarly research		e	Г	O ther					
c										
4	Preservation for future generations Provide a description of the organization's	s collections and av	nlain ho	w thay f	urthor th	o organizatio	n's avamnt	t nurnoco	ın	
	Part XIII			·			·	. purpose	111	
5	During the year, did the organization solid assets to be sold to raise funds rather that							☐ Yes	. □ No)
Pa	rt IV Escrow and Custodial Arra Complete if the organization a Part X, line 21.	_	n Form	990, P	art IV,	line 9, or re	ported ar	ı amoun	t on Forr	n 990,
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?	todian or other inte	rmediary	for con	itributior	ns or other as:	sets not	┌ Yes	s	•
ь	If "Yes," explain the arrangement in Pa	art XIII and comple	te the fo	llowina t	table			A me	ount	
c	Beginning balance	•		,		10	: -			
d	Additions during the year					10	ı			
е	Distributions during the year					16	:			
f	Ending balance					1f				
2a	Did the organization include an amount or	n Form 990, Part X,	lıne 21,	for esc	row or cu	ıstodıal accou	unt liability	′ [?]	. □ No)
b	If "Yes," explain the arrangement in Part	XIII Check here if	the expl	anation	has bee	n provided in	Part XIII			
Pa	rt V Endowment Funds. Complet									
	·	(a)Current year	(b) P	nor year	b (c)	Two years back	(d)Three y	ears back	(e)Four ye	ars back
1 a	Beginning of year balance									
b	Contributions • • • • • • •									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
_										
2	Provide the estimated percentage of the o	current year end bal	ance (III	ne 1g, c	olumn (a)) held as				
a	Board designated or quasi-endowment									
b	Permanent endowment ▶									
С	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c :	should equal 100%								
3а	Are there endowment funds not in the posorganization by	session of the orga	nızatıon	that are	held an	d administere	ed for the		Yes	No
	(i) unrelated organizations								(i)	
h	(ii) related organizations							3a	(11) b	<u> </u>
4	Describe in Part XIII the intended uses of									<u> </u>
Pa	rt VI Land, Buildings, and Equip									
	Complete if the organization a	inswered 'Yes' to	Form 9		rt IV, li other bas			<mark>O, Part X</mark> Accumulated		
	Description of property		(a	i) (inve		Cost or other (other)		depreciation		ok value
1 a	Land		[
b	Buildings		[
c	Leasehold improvements		. [
d	Equipment									
	Other									
Tot	al. Add lines 1a through 1e <i>(Column (d) mus</i>	t equal Form 990, Pa	rt X, colu	mn (B),	Iine 10(c	<i>))</i>		. ▶		0

	See Form 990, Part X, line 12.	T	/L\D1	/_W.w
	(a) Description of security or categor(including name of security)	ory	(b)Book value	(c)Method of valuation Cost or end-of-year market value
	al derivatives			
(2) Closely (3) O ther	r-held equity interests			
	mn (b) must equal Form 990, Part X, col (B) line 12 , Investments—Program Related			
	Complete if the organization answe	red 'Yes' on Form 99	0, Part IV, line 11c.	See Form 990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
				Cost of end-of-year market value
	mn (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	3		Form 990, Part IV, line	e 11d See Form 990, Part X, line 15 (b) Book value
	(a) De	escription		
	ompany accounting	escription		4,451,849
		escription		4,451,849 7,893,320
	ompany accounting	escription		
	ompany accounting	escription		
	ompany accounting	escription		
	ompany accounting	escription		
	ompany accounting	escription		
	ompany accounting	escription		
	ompany accounting	escription		
	ompany accounting	escription		
(2) Loan to	ompany accounting to Chamber of Commerce of the USA umn (b) must equal Form 990, Part X, col (B) In	ne 15)		7,893,320
(2) Loan to	umn (b) must equal Form 990, Part X, col (B) In	ne 15)		7,893,320
(2) Loan to	ompany accounting to Chamber of Commerce of the USA umn (b) must equal Form 990, Part X, col (B) In	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	umn (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the of See Form 990, Part X, line 25.	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia) Part X 1.	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia Part X	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia Part X	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Columbia Part X	ormpany accounting or Chamber of Commerce of the USA from (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the ormalised See Form 990, Part X, line 25. (a) Description of liability	ne 15)	d 'Yes' on Form 990	7,893,320
Total. (Colu	or Chamber of Commerce of the USA www. (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the Complete See Form 990, Part X, line 25. (a) Description of liability come taxes	ne 15)	d 'Yes' on Form 990	7,893,320 12,345,169 , Part IV, line 11e or 11f.
Total. (Column to Total. (Colu	or Chamber of Commerce of the USA www. (b) must equal Form 990, Part X, col (B) In Other Liabilities. Complete if the conservation of liability (a) Description of liability come taxes	ne 15)	d 'Yes' on Form 990	7,893,3 12,345,1 Part IV, line 11e or 11f.

2

а

е

а b

c

Part XII

5

1

2

а

b

c

d

е 3

> а b

> c

Part XIII

information

Part X, Line 2

3

Schedule D (Form 990) 2015

Page 4

483,077

0

44,889,806

2,826,531

38,233,353

2,200,458

40,433,811

Schedule D (Form 990) 2015

Net unrealized gains (losses) on investments Donated services and use of facilities 2b

b c Recoveries of prior year grants **2**c d Other (Describe in Part XIII) 2d

Total revenue, gains, and other support per audited financial statements . . .

Add lines 2a through 2d . . . Subtract line 2e from line 1 . . . Amounts included on Form 990, Part VIII, line 12, but not on line 1

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.

Donated services and use of facilities . .

Prior year adjustments

Other losses

Other (Describe in Part XIII)

Supplemental Information

Add lines 2a through 2d . . .

Subtract line 2e from line 1 .

Add lines 4a and 4b . .

Return Reference

Add lines **4a** and **4b**

Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

.

Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

examinations for years prior to 2012

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional

Explanation

Total expenses and losses per audited financial statements .

4b Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2b

2c 2d

ASC 740 footnote from 2015 audit Management's analysis of uncertain tax positions as required under Financial Accounting Standards Board Accounting Standards Codification Topic (ASC) 740, Income Taxes, determined that ILR had no uncertain tax positions, and as such, no liability has been recorded as of December 31, 2015 or 2014 Management does not anticipate any material changes in this position in the next 12 months ILR, CFR, MCR, and Article III are subject to routine audits by

taxing jurisdictions, however, there are currently no audits for any tax periods in progress Management believes ILR, CFR, MCR, and Article III are no longer subject to income tax

319,848

2,506,683

2,200,458

319,848

163,229

4c 5 1

2e

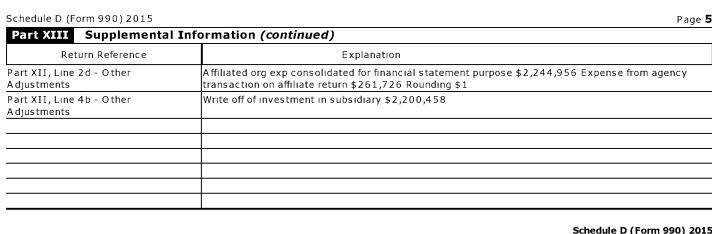
3

4c

2e

3

44,889,806 41,059,884



efile GRAPHIC print -	DO NOT PROCESS	As Filed Dat	ta -	DLN	93493314009856
SCHEDULE F	Statement of	Activities (Outside the Unit	ed States	OMB No 1545-0047
(Form 990)	► Complete	e if the organizatio	n answered "Yes" to Form	990,	2015
		•	l4b, 15, or 16.		2013
Department of the Treasury Internal Revenue Service	▶ Information about Sched		o Form 990. nd its instructions is at w	ww.irs.gov/form990.	Open to Public Inspection
Name of the organization				Employer ide	ntification number
US Chamber Institute for Le	egal Reform			52-2109035	
	ormation on Activithe organization answ			14b.	
	Does the organization				
	ce, the grantees' eligib	ulity for the gran	nts or assistance, and	the selection criteria	
used to award the g	grants or assistance?				☐ Yes ☐ No
2 For grantmakers. I assistance outside	Describe in Part V the o the United States	organization's p	rocedures for monitori	ng the use of its gra	nts and other
3 Activites per Region	(The following Part I, line	e 3 table can be d	uplicated if additional sp	ace is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	
(1) See Add'l Data			,		
(2)					
(3)					
(4)					
(5)					
3a Sub-total		0 10			1,306,474
b Total from continuation to Part I		0 0			(
c Totals (add lines 3a a	, ,	0 10	1	 No 50082W Sche	1,306,474 dule F (Form 990) 2015

(i) Method of

valuation

(book, FMV,

appraisal, other)

(2) (3) (4) Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(d) Purpose of

arant

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

1	(a) Name of	(b) IKS code
	organization	section
		and EIN (if
		applicable)
(1)	

(h) IDC code

(c) Region

(f) Manner of

cash

disbursement

(g) A mount

of non-cash

assistance

(h) Description

of non-cash

assistance

(e) A mount of

cash grant

appraisal, other)

Schedule F (Form 990) 2015

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (b) Region (c) Number of (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation non-cash assistance assistance (book, FMV,

Part III Can b	יש
(a) Type of grant or assistance	

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Sch	edule F (Form 990) 2015			Рa	ge 4
Pa	rt IV Foreign Forms				
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	√	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Г	Yes	✓	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Г	Yes	▽	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Г	Yes	√	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Г	Yes	✓	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If				

5713, do not file with Form 990)

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form

Yes

Schedule F (Form 990) 2015

Schedule F Part I We use the accrual method of accounting on all of our transactions

Explanation

Page 5

Schedule F (Form 990) 2015

Part I. line 3

990 Schedule F, Supplemental Information

Return Reference

Additional Data

Europe

North America

Software ID:

Software Version:

EIN: 52-2109035

Name: US Chamber Institute for Legal Reform

Building of alliance due

to global forum shopping

Building of alliance due

to global forum shopping

92,274

16,022

Form 990 Schedule F F	Part I - Activities	Outside The	United States

0

0

(a) kegion	offices in the region	employees or agents in region	conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Fotal expenditures for region
East Asia	0		, ,	Building of alliance due to global forum shopping	7,138

engagements

engagements

Seminars and speaking

Seminars and speaking

(a) Region	(b) Number of	(c) Number of	(d) A ctivities	(e) If activity listed in	(f) To
	offices in the	employees or	conducted in region (by	(d) is a program	
	region	agents in	type) (ı e , fundraısıng,	service, describe	
		region	program services,	specific type of service	
			grants to recipients	(s) in region	I

(a) Region (b) Number of (c) Number of (d) Activities (e) If activity listed in (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services. grants to recipients (s) in region located in the region) 15,114

Furone		Program services	Policy analysis in	l
South America	0	engagements	to global forum shopping	1

			engagements	to global forum snopping	
Europe	0	8	Program services	Policy analysis in	1

Form 990 Schedule F Part I - Activities Outside The United States

East Asia

Europo		Dragram carusas	Dollary analysis in	1 117 707
		engagements	to global forum shopping	

Europe	0	8	Program services	Policy analysis in Europe	1,117,787

IProgram services

Policy analysis in East

lA s i a

56,511

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities (e) If activity listed in (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, service, describe agents in region specific type of service region program services, (s) in region grants to recipients located in the region) North America Policy Analysis in North 1,628 Program Services A merica

Department of the Treasury

Name of the organization

Internal Revenue Service

DLN: 93493314009856

OMB No 1545-0047

Supplemental Information Regarding SCHEDULE G (Form 990 or 990-EZ) **Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990 **Employer identification number**

Open to Public Inspection

Reform					
				on Form 990, Part IV	, line 17.
nization raised fund	ds through	n any of th	ie following activities Ch	neck all that apply	
			e Solicitation of no	n-government grants	
icitations			f Solicitation of go	vernment grants	
			g	ng events	
5					
					es No
			isers) pursuant to agreei	ments under which the fu	ındraıs er ıs
(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
	Yes	No			
General Fundraising	Yes		44,741,726	1,000,000	43,741,726
		•	44,741,726	1,000,000	43,741,726
	tivities.Comples are not required are not required at the control of the control	tivities.Complete if the sare not required to consist and required to consist at its state of the same	tivities.Complete If the organization raised funds through any of the inization raised funds through any of the inizations. It written or oral agreement with any III Form 990, Part VII) or entity In confist paid individuals or entities (fundrated \$5,000 by the organization. It is a control of the initial paid of the initia	tivities.Complete if the organization answered "Yes" is are not required to complete this part. Inzation raised funds through any of the following activities. Che	sitivities.Complete if the organization answered "Yes" on Form 990, Part IV is are not required to complete this part. Inization raised funds through any of the following activities. Check all that apply e Solicitation of non-government grants f Solicitation of government grants g Special fundraising events g Special fundraising events g Special fundraising events g Special fundraising events g Special fundraising Tyte g g g g g g g g g

Schedule G (Form 990 or 990-EZ) 2015 Page 2 Fundraising Events. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b)Event #2 (c)Other events (d) Total events (add col (a) through (event type) (event type) (total number) col (c)) 1 Gross receipts . 2 Less Contributions. 3 Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes 6 Rent/facility costs Expenses 7 Food and beverages 8 Entertainment Teg Teg 9 Other direct expenses 10 Direct expense summary Add lines 4 through 9 in column (d) . . . 11 Net income summary Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b)Pull tabs/Instant (d) (c)O ther gaming Revenue (a)Bingo Total gaming (add col bingo/progressive bingo (a) through col (c)) 1 Gross revenue . Expenses 2 Cash prizes 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes______% Yes % **☐ Yes** % No 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities Yes No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain

Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

If "Yes," explain

Yes No

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493314009856 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest 2015 Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990. Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** US Chamber Institute for Legal Reform 52-2109035 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? **4**a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Any related organization? 5b If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Any related organization? 6b If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? Schedule J (Form 990) 2015 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50053T

Former Director

(ii)

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (1) compensation	(II) Bonus & Incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 Lisa A Rickard President/Director	(i)	597,653	1,250,000	426,129	41,400	17,899	2,333,081	0
•	(ii)	0	0	0	0	0	0	0
2 Harold H KimEVP, ILR	(i)	333,818	165,000	21,738	26,952	25,003	572,511	0
	(ii)	0	0	0	0	0	0	0
3 Matthew S De Cazotte VP, International Initiatives	(i)	196,962	0	0	53,078	518	250,558	0
,	(ii)	0	0	0	0	0	0	0
4 Page C Faulk VP, Legal Reform Initiatives	(i)	223,699	20,000	0	21,921	7,746	273,366	0
. 5	(ii)	0	0	0	0	0	0	0
5 Margnta J Perlman SVP, Marketing and Ops, ILR	(i)	183,858	35,000	0	36,102	20,424	275,384	0
	(ii)	0	0	0	0	0	0	0
6 Bryan E Quigley SVP, Strategic	(i)	295,383	80,000	0	27,825	23,355	426,563	0
Communications	(ii)	0	0	0	0	0	0	0
7 Matthew Webb SVP, Legal Reform Policy	(i)	234,212	0	0	14,547	15,314	264,073	0
, 3	(ii)	0	0	0	0	0	0	0
8 Mary H Terzino	(i)	190,087	0	0	0	0	190,087	0

Page 3

Schedule J (Form 990) 2015

President for business use only. They are not treated as taxable benefits Part I. Line 3

The US Chamber Institute for Legal Reform relied on the board compensation committee of an affiliated organization that used one or more of the methods described above to establish the top management official's compensation Part I, Line 4b Supplemental Pension list. Lisa Rickard 349,581 Harold Kim 21,738 The Supplemental Pension Plan provides cash payments to participants based on a

formula that coordinates with the benefits that cannot be paid by the Retirement Plan due to the qualified plan pay cap under the law. These benefits are

calculated and paid annually, there is no deferred component

Schedule J (Form 990) 2015

efile GRAPH	IC print - [OO NOT PROC	CESS	As File	ed Dat	a -				DLN:	9349	33140	09856
Schedule L		Tra	ansac	tions	with I	Intereste	d Person	S			омві	No 1545	-0047
(Form 990 or 99)0-EZ)	"Yes" on	Form 9° or	90, Part 1 Form 990	V, lines -EZ, Par	ganization an 25a, 25b, 26, t V, line 38a o 190 or Form 99	27, 28a, 28b, o or 40b.	or 28 c,			2	01	.5
Department of the Freasury		▶Information		chedule L	. (Form 9			ıctions	is at			en to P	
nternal Revenue Se												"	
Name of the or US Chamber Instit	J	form									ficatio	n numbe	r
Part I Exce	ess Benefit	t Transactio	ns (sect	tion 501(c)(3), se	ection 501(c)	(4), and 501(c		2 - 2 1 0 · organı		only)		
Comp	olete if the org	janızatıon answe	ered "Ye	s" on For	m 990,	Part IV, line 2	25a or 25b, or	Form 9	990-E	Z, Part	V , line		
1 (a) Nam	ne of disqualif	ied person	(b)	Relation		ween disquali ganization	fied person an		•	cription saction	of	(d) Corr	No No
						3						163	110
								+					
								+					
								+					
4958 .		incurred by orga · · · · , if any, on line 2						٠.		> \$			
Со	mplete if the	Purpose of	wered " t on Forr	Yes" on F m 990, Pa oan to m the	orm 990		(f)Balance		In	(h Appro by boa) oved ird or	(i)Wr agreen	
			То	Fro	m			Yes	No	Yes	No	Yes	No
												+	
												+	
「otal		<u> </u>											
Part IIII Gra		sistance Ben											
		organization (b) Relationsh								1.,			
(a) Name of i			iib betwe	en (c)	A mount						Purpo	se of ass	istance
perso		interested personal	on and		, mount	of assistance	e (d) Type	of assı	Stallet	(e)	,		
perso		interested pers	on and		711104116	of assistance	e (d) Type	of assı	Stalle	(e)			
perso		interested pers	on and		, , , , , , , , , , , , , , , , , , ,	of assistance	e (d) Type	of assi	Stalle	(e)			
perso		interested pers	on and		, villoune	of assistance	e (d) Type	of assi	Stalle				
perso		interested pers	on and		7,1110 unit	of assistance	e (d) Type	ofassı	Stalle				
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perso		interested pers	on and		7,1110 4110	of assistance	e (d) Type	of assi	Stalle				
perso		interested pers	on and		771100110	of assistance	e (d) Type	of assi	Stalice				

organization's revenues? Yes

Page 2

No

Νo

Νo

Nο

Nο

Νo

Νo

Nο

Nο

Nο

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.										
Complete if the organization	n answered "Yes" on F	Form 990, Part IV, lii	ne 28a, 28b, or 28c.							
(a) Name of interested person	(b) Relationship	(c) A mount of	(d) Description of tra							

(1) Schedule B number 7

(2) Schedule B number 17

(3) Schedule B number 23

(4) Schedule B number 38

(5) Schedule B number 57

(6) Schedule B number 73

(7) Schedule B number 78

(8) Schedule B number 79

(9) Schedule B number 97

Return Reference

Part V

Supplemental Information

 (b) iterationship
between interested
person and the
organization

Substantial contributor

Provide additional information for responses to questions on Schedule L (see instructions)

Substantial contributor

transaction

180,473 122,694 231,398 370,186

388,328

714,528

334,739

Explanation

consulting fees consulting fees fees See Part V Legal policy

consulting fees

534,293 | See Part V Policy consulting

consulting fees

fees

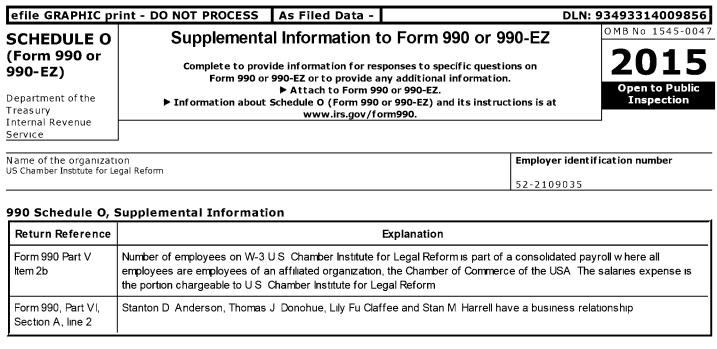
747,373 See Part V Legal policy See Part V Legal policy See Part V Policy consulting See Part V Policy consulting

See Part V Policy consulting

See Part V Policy consulting

See Part V Legal policy

Schedule L (Form 990 or 990-EZ) 2015



Return Explanation Reference Form 990, Part VI. In accordance with the Audit Committee charter, the draft Form 990 was provided in advance to the Audit Committee

members, and reviewed individually with each member prior to filing. The Audit Committee performs this function pursuant to a delegation from the Board of Directors. The board receives the most recently completed tax return at the next

990 Schedule O, Supplemental Information

Section B. line 11

	regularly scheduled meeting
Form 990, Part VI, Section B, line 12c	We annually notify staff of the Standards of Conduct and Ethics policy, which includes a requirement that any transaction or relationship that is reasonably expected to give rise to an actual or apparent conflict of interest be brought to the attention of a supervisor, a senior manager in the Talent Solutions department or the Office of the General Counsel In addition, we issue an annual written questionnaire to all members of the board of direct
	tors asking for information on potential conflicts of interest, w hich is gathered by the C

hief Financial Officer All reports of potential conflicts will be evaluated by the Genera I Counsel, who serves as the US Chamber Institute for Legal Reform's (ILR) Ethics Officer. in consultation with other senior management and staff, as appropriate. Any conflicts of interest involving board members or staff are resolved in accordance with the ILR's confli cts policies

990 Schedule O, Supplemental Information

Return
Reference

	Explanation
•	
	Part VI Question 15a The process for determining total compensation of the President, who is a direct report of the U.S.

Chamber of Commerce President/CEO, and whose compensation is charged to the Institute for Legal Reform, is as follows

Total compensation is reviewed annually by an independent compensation consultant. The consultant prepares a compensation

line 15b

Form 990.

Section B.

Part VI.

study primarily utilizing, as available, Form 990s and surveys of comparable organizations with similar responsibilities. Based on this information, total compensation is determined by the U.S. Chamber of Commerce's President/CEO and U.S. Chamber of Commerce's Employee Compensation and Benefit Arrangements Committee on an annual basis. Part VI Question 15b The process for determining total compensation for the key employee, whose compensation is charged to the Institute for Legal Reform, is as follows. An independent compensation consultant provides supporting data and analysis to the U.S. Chamber of Commerce's Vice President, Administration and the Vice President, Talent Solutions who establishes job classifications and compensation ranges for all employees. Based on this information, individual total compensation is determined by the individual's supervisor and the U.S. Chamber of Commerce's Vice President, Administration and the Vice President. Administration and the Vice President.

supervisor and the U.S. Chamber of Commerce's Vice President, Administration and the Vice President, Talent Solutions on an annual basis

Form 990,
Part VI,
Section C,
line 19

Supervisor and the U.S. Chamber of Commerce's Vice President, Administration and the Vice President, Talent Solutions on an annual basis

The form 990 is made available to any member of the public who requests a copy. Any reques
tor is forw arded to the Administrative Director of Finance of the Chamber of Commerce of the USA, who will forward a copy of the document to the requestor. The organization's gover ning documents, conflict of interest policy, and financial statements are not made available to the public.

990 Schedule O, Supplemental Information Return Reference Explanation

Policy and research consulting 4489368 Temp salaries and recruiting 153453

Form 990, Part IX, line 11g

SCHEDULE R
(Form 990)

Related O

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 3

► Attach to Form 990. ► Information about Schedule R (Form 990) and its instructions is at <u>www.irs.qov/form990</u>.

2015

DLN: 93493314009856

Open to Public Inspection

Name of the organization US Chamber Institute for Legal Reform				Employer id	lentification number		
- Continue Market of Legal Nelonii				52-210903	35		
Part I Identification of Disregarded Entities Complete	ıf the organization a	answered "Yes" on	Form 990, Part	IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) Article III Films LLC 1615 H ST NW Washington, DC 20062 26-3139751	Film production	DE	0	0	US Chamber Institute for Legal Reform	_	
Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the	 tions Complete if th tax year.	e organization ans	swered "Yes" on	Form 990, Par	t IV, line 34 because it h	nad on	.e
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity st (if section 501(c		Section (13) co	
(1)Coalition for Reform Inc	Supports legislative efforts	DE	501(c)(6)		US Chamber Institute for	Yes Yes	No
1615 H St NW Washington, DC 20062 52-2333402	in support of legal reform				Legal Reform		
						_	
						<u> </u>	_
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 5013	35Y		Schedule R (Form	1 990) 2	2015

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part	IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.	

(a) Name, address, and EIN of	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	G)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Gener	ral or	Percentage
related organization		domicile		income(related,	total income	end-of-year	alloca	tions?	amount in box	mana	iging	ownership
		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from					Schedule K-1			
		country)		tax under					(Form 1065)			
				sections 512-								
				514)			Yes	No	1	Yes	No	
							100			1.05		
											\vdash	
					I	I						
	_											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	Section (b)(control enti	n 512 13) olled ty?
								Yes	No
(1) The Madison County Record Inc 1615 H St NW Washington, DC 20062 20-1452063	Newspaper publishing	ΙL	US Chamber Institute for Legal Reform	c	44,498	431	100 000 %	Yes	

Schedule R (Form 990) 2015					Pag	ge 3
Part V Transactions With Related Organizations Complete if the organization answ	ered "Yes" on Form	990, Part IV, line	e 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Τ,	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV	'			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
f b Gıft, grant, or capital contribution to related organization(s)			[1b \	Yes	
${f c}$ Gıft, grant, or capital contribution from related organization(s)			[1 c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1 g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)				11		No
				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				1 p		No
f q Reimbursement paid by related organization(s) for expenses				1q		No
${f r}$ O ther transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)			[1 s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complet	e this line, including co	vered relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amou	unt inv	olved	
(1)Madison County Record	В	2,200,458	Actual expense			
	pan guarantees to or for related organization(s) pan guarantees by related organization(s) pan guarantees by related organization(s) particles to related organization(s) particles or membership or fundraising solicitations for related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organization(s) particles to services or membership or fundraising solicitations by related organi					

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions														
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	end-of-year			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No		
				H					\blacksquare			 ! !		
												H		
								<u> </u>				\vdash		
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